

MARYLAND COMMISSION ON KIDNEY DISEASE

The Connection

Volume 1, Issue 2

April 2003



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Message from the Chairman Jeffrey Fink, M.D.



It was with a measure of gratitude and anxiety that I accepted the appointment as the Chairman of the Maryland Commission on Kidney Disease. I anticipated that during my tenure the renal care community and our patients will be faced with several new and ever-present old challenges. The Commission will make all efforts to provide leadership during these uncertain times.

I envision that the issues with the most potential to distract us from giving the highest quality of care to patients with kidney disease is ever dwindling reimbursement, the regulatory burden of HIPPA, and an ever growing need for providers due to the epidemic of kidney disease. The Commission members, staff and I will do our best to offer leadership and to be a useful resource in the changing healthcare environment. Please don't hesitate to contact us, as our primary goal is to maintain open communication with the community of kidney disease providers and patients.

-Jeffrey Fink, M.D.



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Commission Meetings

The Commission on Kidney Disease meets at:

4201 Patterson Ave.
beginning at 2:00pm

Scheduled meetings
for 2003 are :

April 24, 2003

July 24, 2003

October 23, 2003



Commission News

Commission on Kidney Disease (CKD) certification

The Commission is urging all new facilities to send their requests and payment for CKD certification within 10 days of the Medicare certification/State licensure. The Commission should be notified at the same time as the Office of Health Care Quality of the opening of any new facility. Failure to certify a new facility in a timely manner will affect Kidney Disease Program participation and reimbursement.

Backflow Preventors

The National Standard Plumbing Code requires that all occupied premises have backflow preventors. The facilities must take appropriate measures to prevent contamination of the main supply of water. The surveyors will be looking for backflow preventors and evidence of annual preventive maintenance on the devices.

Facilities Applying for Certification with the Commission



Presently the following facilities have requested CKD certification:

Chesapeake Kidney Center - Riverview
Davita Rivertowne
Robinwood Dialysis Facility
Porter Dialysis Frankford
Renal Care of Bowie
Peninsula Renal Care
Montgomery Renal Center
FMC Hyattsville

Facilities Closed :

The following facilities have notified the Commission of their closure:

Bon Secours Ravenwood
BMA Laurel
FMC Irvington Knolls
FMC Lorien Columbia
Bon Secours Glen Burnie

Practice Issue

The CDC has published recommendations regarding re-entry into a single dose vials. The recommendations have been accepted by Centers for Medicare and Medicaid Services. The guidelines include who can draw up medications, use of aseptic technique, all doses from a given vial must be drawn and administered within a 4 hour period, labeling and storage of open vials, and quality assurance activities that assure compliance with the recommendations.



Regulation Updates

The Commission is in the process of updating COMAR 10.30.01. Medical Director Responsibilities, Discharge Policies, Staffing, and Transplantation are addressed in the proposed amendments. The Commission will vote on the changes and the proposed regulations will be posted in the Maryland Register. The community will have an opportunity to review and comment on the proposed changes. The Commission is very excited about the updates. The regulations will be reformatted and should be easier to read.

The Training Program for the Certified Nursing Assistant



The Training Program for the Certified Nursing Assistant - Dialysis Technician (CNA-DT) developed by the Maryland Renal Administrators Association in collaboration with the Commission, has been approved by the Maryland Board of Nursing. This uniform training program must be utilized by all dialysis centers who wish to become a recognized Board of Nursing approved CNA-DT Training Program. The curriculum is available from the Maryland Board of Nursing by contacting Pamela Ambush-Burris RN, MS Director of Nursing Education and Licensure, (410-585-1913).

How to become an approved CNA-DT Training Program

Dialysis Centers who are licensed by the State of Maryland are eligible to be approved to teach the CNA-DT Program. The Dialysis Center must meet the requirements for Nursing Assistant Training Program Regulations COMAR 10.39.02 and teach the Board approved CNA-DT Training Program. Training programs will be surveyed periodically by the Board of Nursing and must resubmit their program for Board approval every two years. The training program, curriculum and application, can be obtained from the Board's Director of Education and Licensure, Pamela Ambush Burris, RN, MS (410-585-1913). All programs currently training dialysis technicians had until February 1, 2003 to complete the Board's approval process or they must cease training the Dialysis Technician beyond that date.

Can Dialysis Technicians from Out of State be Certified as a CNA-DT

Only those dialysis technicians who hold current active certification as a hemodialysis technician by BONENT may be endorsed into Maryland as a CNA-DT.

All other out-of-state candidates will be required to successfully complete a CNA-DT training program written final examination and clinical competency demonstration in order to be eligible for CNA-DT certification. Any out-of-state candidate who is unsuccessful on either the written or clinical component or both is required to complete a Maryland approved CNA-DT training program.

The applicant is required to complete the Board's endorsement process prior to practicing as a CNA-DT. All other out-of-state candidates will be required to complete a Maryland Board approved training program for CNA-DT.

The Kidney Disease Program of Maryland

As the political hub of international affairs, Washington D.C. is the logical destination for diplomats and other foreign nationals and their families. Given its proximity to the District and the numerous benefits provided by the State, Maryland is the choice of residency for many of those foreign nationals. This is particularly so in the Maryland counties immediately bordering the District.

Maryland's Kidney Disease Program (KDP), a forerunner among the twenty-four states offering Kidney Disease Programs, is especially attractive to end-stage renal disease (ESRD) patients. The District of Columbia, Virginia and West Virginia do not have Kidney Disease Programs to assist their (ESRD) populations.

Maryland KDP regulations, specifically COMAR 10.20.01.03A(1)(b) & (c) address alien coverage as follows: To be eligible for enrollment in the Program an applicant shall:

- 1) Be a resident of Maryland and one of the following:
A citizen of the United States, An alien admitted for permanent residence or otherwise permanently residing in the United States under color of law, including an alien who is lawfully present in the United States pursuant to 8 U.S.C. §1101 et seq., or An alien lawfully admitted under authority of the Indochina Migration and Refugee Assistance Act of 1975, 22 U.S.C. §2601 et seq.;
- 2) Be certified by a physician as having end stage renal disease;
- 3) Meet one of the following require-

ments:

Have begun a regular course of maintenance renal dialysis in a certified facility or have received a renal transplant, or both, or have begun a course of maintenance renal dialysis in an out-of-State facility when the Program has preauthorized the treatment based on the facility's proximity to the applicant's residence or to assure continuity of care, or both; and

- 4) Submit an application in accordance with Regulation .02 of this chapter.

The Kidney Disease Program does accept applications for KDP certification from aliens with the exception of those foreign nationals who are employed in the Embassies of their native country.

(cont'd on page 4)

Maryland Patient Advocacy Group

The Maryland Patient Advocacy Group (MPAG) is a group of volunteers that works tirelessly to assure Maryland's ESRD population access to care. MPAG operates voluntarily and without any public financial support, and **is not part of any State Government Agency.**

Alien Emergency Medicaid Program - Illegal aliens who have certain "emergent" conditions are eligible for Medical Assistance. One of those conditions is kidney failure. At the beginning of March a letter was sent to several alien dialysis patients stating that as of 3/31/03 out patient dialysis would no longer be covered. Apparently there had been several court rulings in other states allowing this. DHMH, based on those rulings, decided to review those aliens on MA on a case by case basis. MPAG and the Maryland Hospital Association, realizing that such a ruling would force these patients into hospital emergency rooms, worked with the General Assembly and Secretary Nelson Sabatini of DHMH. Secretary Sabatini realizing the impact of such a

move agreed that out patient dialysis would remain a covered service.

Preferred Drug List - as a cost savings measure the DHMH is initiating a PDL for the dually eligible - those on both Medicare and Medicaid. The regulations carved out drugs for AIDS and mental illness requiring preauthorization for all drugs not on the PDL. HB 1093, sponsored by Del. John Hurson, Chairman of the Health and Government Operations Committee introduced a bill Entitled Maryland Medical Assistance Program - Pharmaceutical Products - Access, Coverage, and Cost-Saving Protections and Programs would protect those on dialysis and with kidney transplant by forbidding the Department from requiring prior authorization for ESRD drugs.

Dialysis Coinsurance - HB 499 - Currently private health insurers view out patient dialysis in the same manner as a visit to a specialty physician's office charging a coinsurance for each visit. This can amount to thousands of dollars per year. HB 499 would have

created a separate category for dialysis allowing one coinsurance charge per quarter. The insurance industry testified that they were unaware of this issue and the obvious burden it created. All involved agreed to send this issue to Summer Study in order to collect all pertinent information and craft a bill that will address it in an equitable manner.

KDP Dental and Optometric Benefit:

KDP has, since its inception, covered dental care prior to transplantation and one visit to an optometrist and one pair of glasses. However, KDP has never had a formal mechanism by which patients could obtain this coverage. Maryland Patient Advocacy Group has arranged with optometric care for KDP patients at For Eyes at all Maryland locations. For locations contact Pearl Lewis at 410-873-3846.

Dental services can be arranged at the Special Patient Clinic at the University of Maryland Dental School, Dr. Eldridge at 410- 706-7039. The Clinic is for those with mental disorders, transplants, MS, etc. Dr. Eldridge's secretary is Eartha and will bill KDP for those certified services for KDP certified patients.

MARYLAND COMMISSION ON KIDNEY DISEASE

4201 Patterson Ave
Baltimore, MD 21215

Phone: 410-764-4799
Fax: 410-358-3083



Address

Medicare Regulations
for ESRD facilities
are available from
Network 5
@ (804) 794-3757



The Training Program for the Certified Nursing Assistant – cont'd

(cont'd from page 2)

Registration as a medication assistant requires all out-of-state candidates to successfully complete the 16 hour medication administration training component of the CNA-DT Training Program. Medication Administration Training from out-of-state can not be endorsed into Maryland.

How often is the CNA-DT Certified

Certification as a CNA-DT is for a two year period. Beginning January 2003 the CNA-DT will renew every other year on their birth month. Currently Certified CNAs are being phased into the two (2) year renewal cycle.

Are there Continuing Education Requirements for the CNA-DT to renew their Certificate

Yes, in addition to the clinical requirement of 16 hours every two years of

active practice as a CNA-DT, the individual must complete one (1) three hour continuing education course taught by an approved CNA-DT training program which includes but is not limited to:

- a) Current state regulations related to the role of the CNA in dialysis.
- b) Uses, actions, related precautions, and possible interactions of current medications used in the care of the ESRD patient.
- c) New care procedures, and
- d) Resources available to the CNA in dialysis which clarify and expand the knowledge of the CNA.

When will the Dialysis Technician obtain a Certificate with CNA-DT on the certificate

In late fall or early winter the Board of Nursing will begin the process of adding CNA-DT to the CNA certificate. This process requires a change in the Board's data base system so it shall take some time to plan for, institute and complete this change.

The Kidney Disease Program

(cont'd from page 3)

Such persons do not meet the definition of "resident" and are not eligible for KDP certification. Applications from foreign nationals must be accompanied by a copy of either the applicant's green card or Immigration form I-94 as proof of legal immigrant status. If an alien submits a KDP application without the necessary immigration documentation, the Program will first seek to secure the required green card or I-94 form by contacting the applicant. Failing to receive the documentation, the Program will refer the application to the Attorney General's office for an opinion on the applicant's immigrant status and therefore, the applicant's eligibility for KDP certification.